	PAIENI	APPLICATION	ive Octob			ON HECO	RD	4	2982	20	2/5	5	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
Τ	TAL CLAIMS		36	,			RAT	RATE		1	RATE	FEE	
FC	R		NUMBER		NUMBER EXTRA		BASIC	BASIC FEE		OR	Basic Fee	710.00	
٤	ITAL CHARGE	BLE CLAIMS	36 mi	una 50=	• 16		XS 9) =	144	ОЯ	X\$18=		
I	EPENDENT C			inus 3±	ح ع	3			120	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								<u>;</u> =	100	OR	+270=		
* If the difference in column 1 is less than zero, enter "o" in column 2								F	619	3	TOTAL	·	
CLAIMS AS AMENDED - PART (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
ENTA		CLAIMS REMAINING AFTER AMENOMENT		HGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATI	Ę	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE	
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_	12-6-09	(Column 1)		(Colur		(Column 3)	·						
ENT B		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI	E.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	

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X\$ 9-

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TOTAL ADDIT. FEE

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Application or Docket Number

<	FIRST PRESE	SENTATION OF MULTIPLE DEPENDENT CLAIM								
3	Independent	•		Minus	***	10				
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LENT C		CLAIMS REMAINING AFTER AMENDMENT			HIG NU PREV PAIC	PRESENT EXTRA				
			M() }}			mn 2)_	Colu	mn 3)		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

** If the "Fighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.*

*** One "Fighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2.*

The "Fighest Number Previously Paid For" (Total or Independent) is the highest number bound in the appropriate box in column 1.

FORM PTO-475 (Per. 800)

Palant and Trademark Office, U.S. DEPARTMENT OF COMMERCE

X\$16=

'X80=

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ADDIT. FEE

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